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Fill in this information to identify your	case:	
United States Bankruptcy Court for t	he:	
Eastern District of Penn	sylvania	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is ar amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Aliya	
	Write the name that is on your	First name	First name
	government-issued picture identification (for example, your	Ishan	
	driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Mitchell Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
,	All other names you have		
2.	used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and <i>doing business as</i>	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>2</u> <u>1</u> <u>3</u> <u>1</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Debtor 1		Aliya	Ishan Mitchell			Case number (if known)			
		First Name	Middle Name Last Name			, , ,			
			About Debtor 1	:		About Debtor 2 (Spou	use Only in a Joint Case):		
4.	Your Emplo	yer Identification							
	Number (El		<u> </u>			<u> </u>			
5.	Where you	live				If Debtor 2 lives at a d	lifferent address:		
			1730 Mohica	n St					
			Number St	treet		Number Street			
			Philadalphia	DA 10129 1116					
			City	, PA 19138-1116 State	ZIP Code	City	State ZIP Code		
			Distribute le les			•			
			Philadelphia County	<u> </u>		County			
				address is different from the that the court will send ng address.		If Debtor 2's mailing a it in here. Note that the at this mailing address	address is different from yours, fill e court will send any notices to you s.		
			Number St	treet		Number Street			
			P.O. Box			P.O. Box			
			City	State	ZIP Code	City	State ZIP Code		
6.		e choosing <i>thi</i> s	Check one:			Check one:			
	district to fi	le for bankruptcy	Over the last have lived it district.	st 180 days before filing t n this district longer than	his petition, I in any other	Over the last 180 have lived in this odistrict.	days before filing this petition, I district longer than in any other		
			I have anot (See 28 U.S	her reason. Explain. S.C. § 1408)		☐ I have another rea (See 28 U.S.C. §			

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Debtor 1 Aliya		Ishan	Mitchell	umber (if known)		
	Firs	st Name	Middle Nar	ne Last Name		•
Dor	t 2. Tall the Co	ourt About Voi	ır Donkrı	untou Coco		
Par	t 2: Tell the Co	burt About You	ır Bankrı	ipicy case		
7.	The chapter of t Code you are ch under		Bankrupto Cha Cha Cha		ch, see <i>Notice Required by 11 U.S.C.</i> e top of page 1 and check the appropr	
8.	How you will pa	y the fee	detail checl a cre I need to Pa I required judge official choose	s about how you may pay. Typi c, or money order. If your attorn dit card or check with a pre-prin d to pay the fee in installments y The Filing Fee in Installments lest that my fee be waived (You may, but is not required to, wa all poverty line that applies to yo	s. If you choose this option, sign and a	If, you may pay with cash, cashier's ur behalf, your attorney may pay with attach the Application for Individuals are filing for Chapter 7. By law, a pur income is less than 150% of the pay the fee in installments). If you
9.	Have you filed f within the last 8		I	District Eastern District of Pennsylvania District District	When 04/26/2024 MM / DD / YYYY When MM / DD / YYYY When MM / DD / YYYY	Case number 24-11411 Case number Case number
10.	Are any bankrupending or bein spouse who is rease with you, obusiness partners affiliate?	g filed by a not filing this or by a		Debtor District Debtor	MM / DD / YYYY When	Relationship to you Case number, if known Relationship to you Case number, if known
					MM / DD / YYYY	
11.	Do you rent you	ır residence?	_	No. Go to line 12.	eviction judgment against you? ent About an Eviction Judgment Agair petition.	nst You (Form 101A) and file it

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Debtor 1 Aliya		Ishan Mitchell			Case number (if known)					
First Name			Middle Name Last Name							
Par	t 3: Repo	t About Any Busin	esses \	You Own as	a Sole Proprietor					
12.	Are you a	sole proprietor of	☑ No.	Go to Part 4.						
	any full- or business?	part-time	☐ Yes	s. Name and lo	ocation of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a		Nan	ne of business, i	if any					
	corporation	, partnership, or LLC.	Nun	nber Stre	et					
	proprietorsl sheet and a	more than one sole nip, use a separate attach it to this								
	petition.		City	,		State	ZIP Code			
			Che	eck the approp	priate box to describe	your business:				
				Health Care I	Business (as defined)				
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))							
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))							
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))							
				None of the a	above					
13.	11 of the B	ing under Chapter ankruptcy Code, u a s <i>mall busin</i> ess	appropi	riate deadlines statement of op	filing under Chapter 11, the court must know whether you are a small business debtor so that it can set the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance tement of operations, cash-flow statement, and federal income tax return or if any of these documents down the procedure in 11 U.S.C. § 1116(1)(B).					
	For a defini	tion of <i>small business</i>	☑ No.	I am not	filing under Chapter 1	11.				
	debtor, see 101(51D).	debtor, see 11 U.S.C. § 101(51D).			g under Chapter 11, b tcy Code.	out I am NOT a small bu	siness debtor according to the definition in the	ing to the definition in the		
			☐ Yes				btor according to the definition in the der Subchapter V of Chapter 11.			
			☐ Yes				btor according to the definition in the			

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Deb	tor 1	Aliya	Ishan	Mitchell	Case number (if known)
		First Name	Middle Nam	e Last Name	
Par	t 4: Report	if You Own or Ha	ave Any H	azardous Property or	Any Property That Needs Immediate Attention
14.	Do you own	or have any	☑ No.		
	property that alleged to pos imminent and	property that poses or is alleged to pose a threat of mminent and identifiable nazard to public health or nafety? Or do you own any property that needs immediate attention?	☐ Yes.	What is the hazard?	
s p	safety? Or c			If immediate attention is r	needed, why is it needed?
	perishable ge that must be	, do you own oods, or livestock fed, or a building rgent repairs?			
				Where is the property?	Number Street

City

State

ZIP Code

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Debtor 1	Aliya	Ishan	Mitchell	Case number (if known)
				

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Middle Name

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

First Name

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Last Name

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

_	I am not required to receive a briefing about credit
	counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debt	tor 1	Aliya	Ishan	Mitchell		Case r	number	(if known)
		First Name	Middle N	ame Last Name				
Par	t 6: Answer	These Question	s for R	eporting Purposes				
16. What kind of debts do you have?			16a.	Are your debts primarily consumincurred by an individual primarily No. Go to line 16b. Yes. Go to line 17.				
			16b.	Are your debts primarily busin for a business or investment or No. Go to line 16c. Yes. Go to line 17.				
			16c.	State the type of debts you owe	that are no	ot consumer debts or bus	iness d	lebts.
17.	Do you estin exempt prop and administ paid that fun	g under Chapter 7? nate that after any erty is excluded trative expenses ar ds will be available on to unsecured	e	No. I am not filing under Chapter Yes. I am filing under Chapter administrative expenses a No Yes	7. Do you e	estimate that after any ex		roperty is excluded and bute to unsecured creditors?
18.	How many c estimate that	reditors do you t you owe?	V	1-49		25,001-50,000 🗖 50,00	0-100,0	000 More than 100,000
19.	How much d assets to be	o you estimate you worth?	ır 🔲 💆	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	liabilities to			\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Foi	r you	I have e If I have States C If no atto have ob I reques I unders bankrup and 357	chosen Code. I ur code. I ur corney reptained art relief in stand malatcy case 11.	nderstand the relief available und presents me and I did not pay or a and read the notice required by 11 accordance with the chapter of t king a false statement, concealin	re that I mader each chagree to pa U.S.C. § 3 itle 11, Uni	ay proceed, if eligible, un- napter, and I choose to pro- ay someone who is not ar 342(b). ited States Code, specified, or obtaining money or pro-	der Cha oceed un attorn ed in this	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I s petition.
		_		MM/ DD/ YYYY				

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Debtor 1	Aliya	Ishan	Mitchell	Case number (if known)
	First Name	Middle Name	Last Name	<u> </u>
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		proceed under each chapter f 11 U.S.C. § 34	Chapter 7, 11, 12, or 13 or or which the person is eligi 2(b) and, in a case in whic	this petition, declare that I have informed the debtor(s) about eligibility to f title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by h § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /c/ Mich	ael A. Cibik	Date 06/12/2025
		*	of Attorney for Debtor	MM / DD / YYYY
		Printed na Cibik La Firm name	w, P.C.	
		Philadel	phia	PA 19102 State ZIP Code
		·	none <u>(215) 735-1060</u>	Email address cibik@cibiklaw.com
		23110		PA PA
		Bar numbe	er e	State

Ca	ase 25-12355	Doc 1 F	Filed 06/12/25 Document	Entered 06/12/25 Page 9 of 54	09:49:00	Desc Main
Fill in this inform	nation to identify yo	ur case and this				
Debtor 1	Aliya	Ishan	Mitchell			
	First Name	Middle Name	Last Name			
Debtor 2	-					
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the	e: Eas	tern Distric	et of Pennsylvania		
Case number						Check if this is an amended filing
Official For	rm 106A/B					
Schedul	e A/B: Pro	perty				12/15
the category whe	nere you think it fit sible for supplying	s best. Be as c correct inform	omplete and accur ation. If more spac	ate as possible. If two mar	ried people ar	ne category, list the asset in re filing together, both are this form. On the top of any
Part 1:	Describe Each R	esidence, Bu	ilding, Land, or (Other Real Estate You	Own or Have	e an Interest In

Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ✓ Single-family home the amount of any secured claims on Schedule D: 1730 Mohican Street Creditors Who Have Claims Secured by Property. ■ Duplex or multi-unit building Street address, if available, or other ☐ Condominium or cooperative description Current value of the Current value of the ■ Manufactured or mobile home entire property? portion you own? Land \$167,920.00 \$167,920.00 ☐ Investment property Philadelphia, PA 19138 ☐ Timeshare Describe the nature of your ownership interest ZIP Code City State Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Philadelphia Who has an interest in the property? Check one. County **Fee Simple** ✓ Debtor 1 only Debtor 2 only Check if this is community property ☐ Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Source of Value: Zillow 209,900 less 20% closing cost Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages \$167,920.00 you have attached for Part 1. Write that number here Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No **√** Yes

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	3.1	Make:	Volkswagen	Who has an interest in the property? Check one. ✓ Debtor 1 only	Do not deduct secured of	aims or exemptions. Put ed claims on Schedule D:
		Model:	Atlas	Debtor 2 only Debtor 1 and Debtor 2 only	Creditors Who Have Clair	ims Secured by Property.
		Year:	2024	At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage:	13000	Check if this is community property (see instructions)	\$28,685.00	\$28,685.00
		Other information:				
		Source of Value:	КВВ			
	14/		ATV			
4.				and other recreational vehicles, other vehicles, and		
	✓ N	•	otors, personar v	watercraft, fishing vessels, snowmobiles, motorcycle ac	cessories	
	_					
	☐ Ye	es				
5.				wn for all of your entries from Part 2, including any		\$28,685.00
	you n	nave attached for Part	2. Write that n	umber here		. ,
Ра 	rt 3:	Describe You	ır Personal a	and Household Items		
Do y	ou owi	n or have any legal or	equitable inter	est in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Hous	ehold goods and furr	nishinas			
٠.		nples: Major appliance	_	ns. china. kitchenware		
			-,	,		
					1	
	√ 1 Y€	es. Describe		d pieces of furniture, furnishings, appliances, s, each valued at \$600 or less.	linens, and other	\$340.00
7.	Elect	ronics				
	Exam			deo, stereo, and digital equipment; computers, printers cluding cell phones, cameras, media players, games	, scanners; music	
	□ N	0				
	_	es. Describe				
	_		or less.	d televisions, mobile devices, and computers,	each valued at \$600	\$200.00
8.	Colle	ctibles of value				
	Exam			s, prints, or other artwork; books, pictures, or other art collections, memorabilia, collectibles	objects; stamp, coin, or	
	√ N	0				
		es. Describe				
9.		oment for sports and	hohhige			
J.		•		and other hobby equipment; bicycles, pool tables, golf	clube skis: canoes and	
		kayaks; carpent	ry tools; musical		Sidos, skis, callues allu	
	√ N	0				
		as Describe				

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10.	Firearms Examples: Pistols, rifles, shot	tguns, ammunition, and related equipment	
	√ No		
	Yes. Describe		
11.	Clothes Examples: Everyday clothes,	furs, leather coats, designer wear, shoes, accessories	
	√ No		
	Yes. Describe		
12.	Jewelry		
	•	costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	
	☐ No		
		/arious used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$330.00
	V	/arious used pieces of jewelry.	
13.	Non-farm animals		
	Examples: Dogs, cats, birds,	horses	
	☑ No		
	☐ Yes. Describe		
14.	Any other personal and hou	sehold items you did not already list, including any health aids you did not list	
	☑ No		
	Yes. Give specific information		
15.		f your entries from Part 3, including any entries for pages you have attached r here	\$870.00
-	December 1	Figure 1.1 Accepts	
Ра	rt 4: Describe Your	Financial Assets	
Do y	ou own or have any legal or e	equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash		
	Examples: Money you have in	n your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	☑ No		
	☐ Yes	Cash:	

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17.	Deposits of money			
			ounts; certificates of deposit; shares in credit unions, brokerage houses, multiple accounts with the same institution, list each.	
	☐ No			
	₫ Yes		Institution name:	
			PNC Bank	
		17.1. Checking account:	Account Number: 9738	\$300.00
			Santander	
		17.2. Checking account:	Account Number: 5794	\$35.00
		17.2. Oncoking dooddin.		· · · · · · · · · · · · · · · · · · ·
			Santander Account Number: 3959	\$5.00
		17.3. Savings account:	Account Number. 3939	\$5.00
18.	Bonds, mutual funds	, or publicly traded stocks		
			okerage firms, money market accounts	
	✓ No			
	☐ Yes			
	_			
19.	Non-publicly traded s LLC, partnership, and		prated and unincorporated businesses, including an interest in an	
	☑ No			
	Yes. Give specific information about them			
20.	Government and corp	porate bonds and other nego	tiable and non-negotiable instruments	
			niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
	√ No			
	Yes. Give specific information about them			
21.	Retirement or pensio	on accounts		
	•		103(b), thrift savings accounts, or other pension or profit-sharing plans	
	√ No			
	☐ Yes. List each account separately	<i>i</i> .		
22.	Security deposits and	d prepayments		
	Your share of all unuse	ed deposits you have made so	that you may continue service or use from a company	
	Examples: Agreemen others	nts with landlords, prepaid rent,	public utilities (electric, gas, water), telecommunications companies, or	
	√ No			
	☐ Yes			

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23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)	
	⊴ No	
	☐ Yes	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	
	☑ No	
	☐ Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	
	☑ No	
	Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property	
	Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	☑ No	
	Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles	
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	☑ No	
	☐ Yes. Give specific	
	information about them	
Mon	ey or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	☑ No	
	Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	
	√ No	
	☐ Yes. Give specific information	
30.	Other amounts someone owes you	
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
30.	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation,	

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Debtor Mitchell, Aliya Ishan Case number (if known) ____

31.	Interests in insurance policies
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance
	☑ No
	Yes. Name the insurance company of each policy and list its value
32.	Any interest in property that is due you from someone who has died
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.
	☑ No
	☐ Yes. Give specific information
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue
	☑ No
	☐ Yes. Describe each claim
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims
	☑ No
	☐ Yes. Describe each claim
35.	Any financial assets you did not already list
	□ No
	✓ Yes. Give specific information Venmo \$0.00
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$340.00
	for Part 4. Write that number here
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?
	✓ No. Go to Part 6.
	Yes. Go to line 38.
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?
	☑ No. Go to Part 7.
	Yes. Go to line 47.
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here
Pa	rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

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53.	Do you have other property of any kind you did not already list?			
	Examples: Season tickets, country club membership			
	√ No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that num	nber here	→	\$0.00
Pa	rt 8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$167,920.00
56.	Part 2: Total vehicles, line 5	\$28,685.00		
57.	Part 3: Total personal and household items, line 15	\$870.00		
58.	Part 4: Total financial assets, line 36	\$340.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$29,895.00	Copy personal property total	+ \$29,895.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62.			\$197,815.00

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Fill in this inform	ation to identify your ca	se:		
Debtor 1	Aliya	Ishan	Mitchell	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the	Eastern	District of Pennsylvania	
Case number				01 1 1 1 1 1 1
(if known)				Check if this i amended filin

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Ider	ntify the Property You	ı Claim as Exempt			
1.	☐ You are clai ☑ You are clai	ming state and federal nor ming federal exemptions.		1 U.S.0		
	Brief description	on of the property and ule A/B that lists this	Current value of the portion you own Copy the value from Schedule A/B	Amo	ount of the exemption you claim ck only one box for each exemption.	Specific laws that allow exemption
	Brief description:	1730 Mohican Street Philadelphia, PA 19138	\$167,920.00	N	\$31,575.00 100% of fair market value, up to any applicable statutory limit \$1,335.00	11 U.S.C. § 522(d)(1) 11 U.S.C. § 522(d)(5)
	Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
3.	(Subject to adju ✓ No	stment on 4/01/28 and ev	. ,	ases file	ed on or after the date of adjustment.) 15 days before you filed this case?	

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_ Case number (if known) _

Debtor 1

AliyaIshanMitchellFirst NameMiddle NameLast Name

	on of the property and ule A/B that lists this	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
property	ac a d unat noto uno		Che	eck only one box for each exemption.	
		Copy the value from Schedule A/B			
Brief description:	2024 Volkswagen	\$28,685.00		\$0.00	11 U.S.C. § 522(d)(2)
ine from	Atlas			100% of fair market value, up to any applicable statutory limit	
Schedule A/B:	3.1			\$0.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
Brief description:	Various used	\$340.00			
	pieces of furniture, furnishings,				
	appliances, linens, and other similar				
	items, each valued at \$600 or less.		_		
ing from	αι ψουσ οι 1655.		₫	\$340.00	11 U.S.C. § 522(d)(3)
ine from Schedule A/B:	6		u	100% of fair market value, up to any applicable statutory limit	_
Brief description:	Various used	\$200.00			
	televisions, mobile devices, and				
	computers, each valued at \$600 or				
	less.		√	\$200.00	11 U.S.C. § 522(d)(3)
_ine from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	_
Brief description:	Various used	\$150.00			
2000 I PHOI I.	articles of clothing, shoes, and				
	accessories, each valued at \$600 or				
	less.		\checkmark	\$150.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	
Brief	Various used	\$180.00			_
description:	pieces of jewelry.		$\overline{\mathbf{A}}$	\$180.00	11 U.S.C. § 522(d)(4)
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Aliya Ishan Mitchell Case number (if known) _

Last Name

Middle Name

First Name

art 2:	Additional Page				
	ription of the property and hedule A/B that lists this	Current value of the portion you own Copy the value from Schedule A/B		nount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
Brief description	Santander Checking account Acct. No.: 5794	\$35.00	√	\$35.00	11 U.S.C. § 522(d)(5)
Line from Schedule A	WB: 17			100% of fair market value, up to any applicable statutory limit	
Brief description	PNC Bank Checking account Acct. No.: 9738	\$300.00			
Line from Schedule	47		□	\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description	Santander Savings account Acct. No.: 3959	\$5.00		A.	44.11.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.
Line from Schedule A	47		1	\$5.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

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			Document	Page 19 of 5	4			
Fill in this inforn	nation to identify yo	our case:						
Debtor 1	Aliya	Ishan	Mitchell					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States	Bankruptcy Court fo	or tho: Ea	stern Dist	rict of Pennsylvan	ia			
	. ,	or trie						
Case number (known)	(if			_			☐ Check if	this is an
							amende	d filing
Official For	m 106D							
Schadu	In D. Cra	aditors W	ho Have C	laims Sec	urad h	ω D	ronarty	10/15
Scriedu	ie D. Cie	Editors VV	ilo Have C	iaiiiis Sec	ureur	Ју Г	i oper ty	12/15
				together, both are equ				
	number (if known		it out, number the en	tries, and attach it to	inis form. On	tne top	or any additional pag	jes, write your
I. Do any cred	ditors have claims	s secured by your p	roperty?					
☐ No. Che	ck this box and sub	omit this form to the c	ourt with your other sc	hedules. You have not	ning else to re	port on th	nis form.	
✓ Yes. Fill	in all of the informa	ation below.	•		· ·			
Part 1:	List All Secured	d Claims						
· art · ·	2.017.11.0004.00							
			n one secured claim, li		Column A		Column B	Column C
			r has a particular claim aims in alphabetical ord		Amount of		Value of collateral that supports this	Unsecured portion
creditor's n		io poddibio, not the die	anno in dipridibotical ore	aor according to the	Do not deduct value of collat		claim	If any
2.1 Ally Fine		Danaw		annuman tha alaims			****	,
Creditor's I	ancial, Inc	Descr	be the property that	secures the claim:	\$48,30	07.00	\$28,685.00	\$19,622.00
	odward Ave	2024	Volkswagen Atlas					
Number	Street							
Number	Olicet		•	claim is: Check all tha	t apply.			
			ntingent					
	MI 48226-3416		liquidated					
City	State	ZIP Code	•					
Who owes	s the debt? Check		of lien. Check all that					
Debtor	•			(such as mortgage or	secured car lo	an)		
Debtor	•		atutory lien (such as tax					
,	1 and Debtor 2 on	_	dgment lien from a law					
anothe		off	ner (including a right to set)					
	if this claim relat unity debt	es to a						
Date debt	was incurred	3/1/2024 Last 4	digits of account nu	mber 1 7 6	7			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$48,307.00

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Case number (if known)

Mitchell

Debtor 1

Aliya

Ishan

First Name Middle Name Last Name Column A Column C Column B Additional Page Amount of claim Value of collateral Unsecured Part 1: that supports this portion After listing any entries on this page, number them beginning with 2.3, Do not deduct the claim followed by 2.4, and so forth. value of collateral. If any 2.2 Midland Mortgage Co Describe the property that secures the claim: \$80,389.00 \$167,920.00 \$0.00 Creditor's Name 1730 Mohican Street Philadelphia, PA 19138 Attn: Customer Service/Bankruptcy As of the date you file, the claim is: Check all that apply. PO Box 26648 Contingent Number Street Unliquidated Oklahoma City, OK 73216-0648 Disputed State ZIP Code Who owes the debt? Check one. Nature of lien. Check all that apply. ✓ Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only ■ Statutory lien (such as tax lien, mechanic's lien) ☐ Debtor 1 and Debtor 2 only Judgment lien from a lawsuit ■ At least one of the debtors and ☐ Other (including a right to another offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 9/1/2012 9 3 0 U.S. Department of Housing and Describe the property that secures the claim: \$0.00 \$12,214.07 \$167,920.00 **Urban Development** 1730 Mohican Street Philadelphia, PA 19138 Creditor's Name Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 100 E Penn Sq FI 11 Contingent Number Street Unliquidated Philadelphia, PA 19107-3325 Disputed City State Who owes the debt? Check one. Nature of lien. Check all that apply. ✓ Debtor 1 only ☐ An agreement you made (such as mortgage or secured car loan) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and ☐ Other (including a right to another offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: \$92,603.07

Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

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Debtor 1 Aliya Mitchell Ishan _ Case number (if known) _ First Name Middle Name Last Name

	Additional Page		Column A Amount of claim	Column B Value of collateral	Column C Unsecured
Pa		is page, number them beginning with 2.3,	Do not deduct the	that supports this	portion
	followed by 2.4, and so forth.		value of collateral.	Ciaiiii	If any
2.4	Water Revenue Bureau	Describe the property that secures the claim:	\$154.96	\$167,920.00	\$0.00
	Creditor's Name	4700 Malifere Overal Bills Indial to BA 4040	<u>.</u>		
	c/o City of Philadelphia Law Department	1730 Mohican Street Philadelphia, PA 1913	58		
	<u> </u>	As of the date you file, the claim is: Check all that	t apply.		
	1401 John F Kennedy Blvd Fl 5	☐ Contingent			
	Number Street	Unliquidated			
	Philadelphia, PA 19102-1617	☐ Disputed			
	City State ZIP Code				
	Who owes the debt? Check one.	Nature of lien. Check all that apply.			
	Debtor 1 only	An agreement you made (such as mortgage or s	secured car loan)		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	✓ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	At least one of the debtors and	☐ Other (including a right to			
	another	offset)			
	☐ Check if this claim relates to a community debt				
	Date debt was incurred	Last 4 digits of account number			
2.5	Water Revenue Bureau	Describe the property that secures the claim:	\$201.50	\$167,920.00	\$0.00
2.5		Describe the property that secures the claim:		\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law			\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913	8	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that	8	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913	8	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd Fl 5	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent	8	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd Fl 5 Number Street	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent Unliquidated	8	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd Fl 5 Number Street Philadelphia, PA 19102-1617 City State ZIP Code Who owes the debt? Check one.	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent Unliquidated	8	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd Fl 5 Number Street Philadelphia, PA 19102-1617 City State ZIP Code	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or second contents)	t apply.	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd FI 5 Number Street Philadelphia, PA 19102-1617 City State ZIP Code Who owes the debt? Check one. 1 Debtor 1 only Debtor 2 only	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or some statement) of the claim is: Check all that apply. Statutory lien (such as tax lien, mechanic's lien)	t apply.	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd Fl 5 Number Street Philadelphia, PA 19102-1617 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or some state) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	t apply.	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd FI 5 Number Street Philadelphia, PA 19102-1617 City State ZIP Code Who owes the debt? Check one. 1 Debtor 1 only Debtor 2 only	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or some statement) of the claim is: Check all that apply. Statutory lien (such as tax lien, mechanic's lien)	t apply.	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd FI 5 Number Street Philadelphia, PA 19102-1617 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or some status) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to	t apply.	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd FI 5 Number Street Philadelphia, PA 19102-1617 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or some status) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to	t apply.	\$167,920.00	\$0.00
2.5	Water Revenue Bureau Creditor's Name c/o City of Philadelphia Law Department 1401 John F Kennedy Blvd FI 5 Number Street Philadelphia, PA 19102-1617 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	Describe the property that secures the claim: 1730 Mohican Street Philadelphia, PA 1913 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or some state) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	t apply.	\$167,920.00	\$0.00

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			ocument	Page 22 of 54		
Fill in this info	rmation to identify yo	ur case:				
Dobtor 1	Aliva	lahan	Mitaball			
Debtor 1	Aliya First Name	Ishan Middle Name	Mitchell Last Name			
	i iist Name	Middle Name	Last Name			
Debtor 2	,					
(Spouse, if filin	g) First Name	Middle Name	Last Name			
United States	s Bankruptcy Court fo	or the: Easter	n Distri	ct of Pennsylvania	_	
Case numbe	r			_		
(if known)						Check if this is an amended filing
						amended ming
Official Fo	<u>rm 106E/F</u>					
Schedi	ule E/F: C	reditors Wh	no Have	Unsecured	d Claims	12/15
other party to Form 106A/B) claims that are	any executory cont and on <i>Schedule G</i> e listed in <i>Schedule</i> atries in the boxes o	racts or unexpired lease : Executory Contracts a D: Creditors Who Have	es that could resu and Unexpired Lea Claims Secured &	It in a claim. Also list e ses (Official Form 106 by <i>Property</i> . If more sp	executory contracts on G). Do not include any ace is needed, copy th	ONPRIORITY claims. List the Schedule A/B: Property (Official creditors with partially secured to Part you need, fill it out, es, write your name and case
Part 1:	List All of Your	PRIORITY Unsecured	d Claims			
✓ No. 0 ☐ Yes. Part 2:	Go to Part 2. List All of Your	NONPRIORITY Unsec	cured Claims			
3. Do any o	reditors have nonp	riority unsecured claim	s against you?			
☐ No. Y ☑ Yes	ou have nothing to re	eport in this part. Submit t	this form to the cou	t with your other sched	ules.	
nonpriori included	ty unsecured claim, li	st the creditor separately none creditor holds a par	for each claim. For	each claim listed, ident	ify what type of claim it is	editor has more than one s. Do not list claims already three nonpriority unsecured
						Total claim
4.1 Affirm	•		Land Authorit		N 5 N N	\$700.00
A	•		Last 4 digit	s of account number	N D N N	\$788.00
•	rity Creditor's Name		When was	the debt incurred?	12/1/2023	
Attn: E	Bankruptcy					
30 Isal	bella St , Floor 4					
Number	Street			•	is: Check all that apply.	
Pittsb	urgh, PA 15212		Conting			
City	State	e ZIP Co	— 🔲 Unliquid			
•			Dispute	d		
	curred the debt? Ch	eck one.	Type of NO	NPRIORITY unsecure	d claim:	
	tor 1 only		☐ Student			
	tor 2 only				aration agreement or div	orce that you did not report as
☐ Deb	tor 1 and Debtor 2 or	nly	priority	•	aranon agreement of div	orce that you did not report as
☐ At le	ast one of the debtor	s and another	. ,		ng plans, and other simil	ar debts
☐ Che	ck if this claim is fo	r a community debt	_	Specify Unsecured	- · · ·	
ls the cl ☑ No	laim subject to offs	et?				_

Yes

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_ Case number (if known) _

Debtor 1

AliyaIshanMitchellFirst NameMiddle NameLast Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page		
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so for	rth.	Total claim
4.2	Affirm, Inc.	Last 4 digits of account number	M Q K C	\$136.00
	Nonpriority Creditor's Name			
	Attn: Bankruptcy	When was the debt incurred?	6/1/2023	
	30 Isabella St , Floor 4			
	Number Street	As of the date you file, the claim is	: Check all that apply.	
	Pittsburgh, PA 15212	Contingent		
	City State ZIP Code	☐ Unliquidated☐ Disputed		
	Who incurred the debt? Check one. ✓ Debtor 1 only	Type of NONPRIORITY unsecured	claim:	
	☐ Debtor 2 only	Student loans		
	Debtor 1 and Debtor 2 only		ation agreement or divorce that you did n	ot report as
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Check if this claim is for a community debt	✓ Other. Specify Unsecured	, , , , , , , , , , , , , , , , , , , ,	
	Is the claim subject to offset?			
	☑ No			
	☐ Yes			
4.3	Amex	Last 4 digits of account number	0 1 7 3	\$9,886.00
	Nonpriority Creditor's Name			
	Correspondence/Bankruptcy	When was the debt incurred?	3/1/2016	
	PO Box 981540			
	Number Street	As of the date you file, the claim is	: Check all that apply.	
	El Paso, TX 79998-1540	☐ Contingent		
	City State ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed Type of NONPRIORITY unsecured	claim:	
	Debtor 1 only	☐ Student loans		
	Debtor 2 only		ation agreement or divorce that you did n	ot report as
	Debtor 1 and Debtor 2 only	priority claims	,	or roport do
	At least one of the debtors and another	Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Check if this claim is for a community debt	☑ Other. Specify CreditCard		
	Is the claim subject to offset?			
	☑ No			
	□ Voc			

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Debtor 1

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page						
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so for	rth.					Total claim
4.4	Amex	Last 4 digits of account number	7	6	0	3		\$4,044.00
	Nonpriority Creditor's Name	When was the debt incurred?		9/1/2	2022			
	Correspondence/Bankruptcy		-	· · · · ·				
	PO Box 981540	As of the data you file the claim is	o. Oha	الميلم	414			
	Number Street	As of the date you file, the claim is	s: Cne	скап	tnat	арріу.		
	El Paso, TX 79998-1540	☐ Contingent☐ Unliquidated						
	City State ZIP Code	☐ Disputed						
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured	claim	:				
	☑ Debtor 1 only	☐ Student loans						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separa	ration a	agreei	ment	or divo	orce that you	u did not report as
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing	a plone	a and	otho	r cimila	or dobto	
	☐ Check if this claim is for a community debt	✓ Other. Specify CreditCard	y pians	s, and	Otrie	i Sillille	ii debis	
	Is the claim subject to offset? ☑ No □ Yes							
4.5	Amex	Last 4 digits of account number	2	8	6	3		\$3,149.00
	Nonpriority Creditor's Name	When we the debt income d2		41416				
	Correspondence/Bankruptcy	When was the debt incurred?		4/1/2	2018	<u> </u>		
	PO Box 981540		0.1					
	Number Street	As of the date you file, the claim is: Check all that apply.						
	El Paso, TX 79998-1540	☐ Contingent☐ Unliquidated						
	City State ZIP Code	☐ Disputed						
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured of Student loans ☐ Obligations arising out of a separa priority claims ☐ Debts to pension or profit-sharing ☐ Other. Specify CreditCard	ration a	agreei				u did not report as
	☑ No ☐ Yes							

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Debtor 1

Pa	Your NONPRIORITY Unsecured Claims –	· Continuation Page				
Afte	r listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim				
4.6	Amex	Last 4 digits of account number 0 8 8 3 \$998.00				
	Nonpriority Creditor's Name Correspondence/Bankruptcy	When was the debt incurred? 2/1/2014				
	PO Box 981540 Number Street EI Paso, TX 79998-1540 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	- As of the date you file, the claim is: Check all that apply. □ Contingent - □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard				
4.7	✓ No ☐ Yes Capital One Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number 9 1 5 8 \$8,077.00 When was the debt incurred? 6/5/2011				
	PO Box 30285 Number Street Salt Lake City, UT 84130-0285 City State ZIP Code	 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed 				
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard				

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Debtor 1

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.8	Capital One	Last 4 digits of account number 1 2 8 7 \$8,077.00
	Nonpriority Creditor's Name	
	Attn: Bankruptcy	When was the debt incurred? 3/1/2017
	PO Box 30285	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Salt Lake City, UT 84130-0285	☐ Contingent
	City State ZIP Code	☐ Unliquidated☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard
4.9	Capital One	Last 4 digits of account number 4 8 9 7 \$2,194.00
	Nonpriority Creditor's Name	<u> </u>
	Attn: Bankruptcy	When was the debt incurred? 12/15/2011
	PO Box 30285	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Salt Lake City, UT 84130-0285	☐ Contingent
	City State ZIP Code	☐ Unliquidated☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard

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Debtor 1

-6	Your NONPRIORITY Unsecured Claims —	Continuation Page					
Afte	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim					
4.10	Capital One	Last 4 digits of account number 8 3 1 5 \$396.00					
	Nonpriority Creditor's Name						
	Attn: Bankruptcy	When was the debt incurred? 8/20/2014					
	PO Box 30285						
	Number Street	As of the date you file, the claim is: Check all that apply.					
	Salt Lake City, UT 84130-0285	☐ Contingent					
	City State ZIP Code	Unliquidated ☐ Disputed					
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard					
4.11	Citi Card/Best Buy	Last 4 digits of account number 0 6 6 3 \$2,413.00					
	Nonpriority Creditor's Name						
	Attn: Citicorp Cr Srvs Centralized Bankruptcy	When was the debt incurred? 3/1/2021					
	PO Box 790040						
	Number Street	As of the date you file, the claim is: Check all that apply.					
	St Louis, MO 36179-0040	Contingent					
	City State ZIP Code	☐ Unliquidated☐ Disputed					
	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard					

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Debtor 1

ŧ	Your NONPRIORITY Unsecured Claims -	- Continuation Page					
Afte	r listing any entries on this page, number them beginnin	ng with 4.4, followed by 4.5, and so forth.					
4.12	Citizens One	Last 4 digits of account number 9 7 2 8 \$2,240.00					
	Nonpriority Creditor's Name	<u> </u>					
	Attn: Bankruptcy	When was the debt incurred? 11/1/2021					
	One Citizens Plaza	•					
	Number Street	As of the date you file, the claim is: Check all that apply.					
	Providence, RI 02903	☐ Contingent					
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed					
	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CheckCreditOrLineOfCredit					
4.13	Dsnb Bloomingdales	Last 4 digits of account number 9 8 6 3 \$13,593.00					
	Nonpriority Creditor's Name	<u> </u>					
	Attn: Recovery "Bk"	When was the debt incurred? 3/1/2014					
	PO Box 9111	•					
	Number Street	As of the date you file, the claim is: Check all that apply.					
	Mason, OH 45040	Contingent					
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed					
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report a priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ChargeAccount					

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Pa	Your NONPRIORITY Unsecured Claims —	· Continuation Page			
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim			
4.14	Jpmcb	Last 4 digits of account number 4 5 5 4 \$917.00			
	Nonpriority Creditor's Name	<u> </u>			
	MailCode LA4-7100 700 Kansas Lane	When was the debt incurred? 7/1/2008			
	Number Street	•			
		As of the date you file, the claim is: Check all that apply.			
	Monroe, LA 71203	Contingent			
	City State ZIP Code	- Unliquidated			
	,	☐ Disputed			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:			
	☑ Debtor 1 only	☐ Student loans			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as			
	☐ At least one of the debtors and another	_ priority claims			
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	-	☑ Other. Specify CreditCard			
	Is the claim subject to offset?				
	☑ No				
	Yes				
4.15	Macy's/ DSNB	Last 4 digits of account number 9 3 7 7 \$2,993.00			
	Nonpriority Creditor's Name				
	Atytn: Bankruptcy 701 E. 60th Street North	When was the debt incurred? 4/1/2015			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
	Sioux Falls, SD 57104	☐ Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	☐ Student loans			
	Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as			
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing plans, and other similar debts			
	☐ Check if this claim is for a community debt				
	•	☑ Other. Specify ChargeAccount			
	Is the claim subject to offset?				
	☑ No				
	☐ Yes				

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Debtor 1

Pa	rt 2: Your NONPRIORITY Unsecured Claims	– Continuation Page						
Afte	listing any entries on this page, number them beginning	ng with 4.4, followed by 4.5, and so fo	rth.				Total cla	aim
4.16	NAVY FCU Nonpriority Creditor's Name Attn: Bankruptcy PO Box 3000 Number Street Merrifield, VA 22119 City State ZIP Code	Last 4 digits of account number 6 1 8 5 \$20,529.00 When was the debt incurred? 12/1/2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated					29.00	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separapriority claims ☐ Debts to pension or profit-sharing ☐ Other. Specify CreditCard	ation	agr				as
4.17	NAVY FCU Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number - When was the debt incurred?	8			<u>4</u> 021	\$98	34.00
	PO Box 3000 Number Street Merrifield, VA 22119 City State ZIP Code	 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed 						
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured of Student loans ☐ Obligations arising out of a separation priority claims ☐ Debts to pension or profit-sharing ☐ Other. Specify CreditCard	ation	agr			,	as

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__ Case number (if known) __

Debtor 1

AliyaIshanMitchellFirst NameMiddle NameLast Name

Pa	t 2: Your NONPRIORITY Unsecured Claims —	Continuation Page
Afte	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.18	NAVY FCU	Last 4 digits of account number 1 4 3 4 \$940.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 4/1/2018
	PO Box 3000 Number Street Merrifield, VA 22119 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard
4.19	✓ No ☐ Yes Nelnet Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number 5 3 3 4 \$0.00 When was the debt incurred? 10/1/2003
	121 S 13th St Number Street Lincoln, NE 68508-1904 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify

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Debtor 1

Pa	rt 2: Your NONPRIORITY Unsecured Claims -	- Continuation Page
After	listing any entries on this page, number them beginnin	g with 4.4, followed by 4.5, and so forth. Total claim
4.20	Nordstrom Signature Visa	Last 4 digits of account number 2 0 1 1 \$8,403.00
	Nonpriority Creditor's Name	<u> </u>
	Attn: Bankruptcy	When was the debt incurred? 11/1/2010
	PO Box 6555	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Englewood, CO 80155-6555	☐ Contingent
	City State ZIP Code	UnliquidatedDisputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ CreditCard
4.21	PNC Financial Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number 0 6 0 4 \$4,910.00 When was the debt incurred? 06/01/2017
	300 5th Ave	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Pittsburgh, PA 15222-2401	☐ Contingent - ☐ Unliquidated
	City State ZIP Code	☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card

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Debtor 1

Pa	rt 2: Your NONPRIORITY Unsecured Claims	— Continuation Page			
After	listing any entries on this page, number them beginn	ing with 4.4, followed by 4.5, and so forth.	1		
4.22	Syncb/Walmart Dc	Last 4 digits of account number 9 1 5 8 \$7,370.0)0		
	Nonpriority Creditor's Name	When was the debt incurred? 3/1/2017			
	Attn: Bankruptcy	When was the dept incurred:			
	Po Box 965060				
	Number Street	 As of the date you file, the claim is: Check all that apply. Contingent 			
	Orlando, FL 32896-5060	— ☐ Unliquidated			
	City State ZIP Code	Disputed			
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card			
4.23	United Rev Nonpriority Creditor's Name Po Box 1184	Last 4 digits of account number 9 9 0 9 \$1,956.0 When was the debt incurred? 4/1/2024	<u>10</u>		
	Number Street	As of the date you file, the claim is: Check all that apply.			
	Langhorne, PA 19047 City State ZIP Code	Contingent			
	Who incurred the debt? Check one. ☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	☐ Student loans			
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify UnknownLoanType			
	Is the claim subject to offset? ☑ No □ Yes				

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__ Case number (if known) __

Debtor 1

AliyaIshanMitchellFirst NameMiddle NameLast Name

Part 4:	Add 1	the Amounts for Each Type of Unsecured Claim			
		ats of certain types of unsecured claims. This information is a for each type of unsecured claim.	s for sta	atisti	ical reporting purposes only. 28 U.S.C. § 159.
					Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00
Hom Part 1	6b.	Taxes and certain other debts you owe the government	6b.		\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00
	6e.	Total. Add lines 6a through 6d.	6e.		\$0.00
					Total claim
Total claims rom Part 2	6f.	Student loans	6f.		<u>\$0.00</u>
Hom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$104,993.00
	6j.	Total. Add lines 6f through 6i.	6j.	1	\$104.993.00

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Fill in this inform	ation to identify your ca	ase:				
Debtor 1	Aliya	Ishan	Mitchell		_	
	First Name	Middle Name	Last Name		_	
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name		_	
United States E	Bankruptcy Court for the	e: Eastern	District of	Pennsylvania		
Case number						
(if known)						Check if this is a amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - 🗹 No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Doroon or	npany with whom you have th	a contract or local	State what the contract or lease is for
2.1	Person or con	npany with whom you have th	e contract or lease	State what the contract or lease is for
2.1	Name			
	Number	Street	_	
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street	_	
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

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				<u>Document Pag</u>	e 36 of 54	
Fill in	this inform	nation to identify you	r case:			
Deb	tor 1	Aliya	Ishan	Mitchell		
		First Name	Middle Name	Last Name		
	tor 2					
(Spo	use, ii iiiing)	First Name	Middle Name	Last Name		
Unit	ed States E	Bankruptcy Court for	the: Easte	District of	Pennsylvania	
	e number own)					☐ Check if this is an amended filing
Offic	ial Forr	n 106H				•
Scl	hedu	le H: You	r Codebto	rs		12/15
iling t he en	ogether, b	ooth are equally res	ponsible for supplyir	ng correct information. If n	nore space is needed, c	urate as possible. If two married people are opy the Additional Page, fill it out, and number Pages, write your name and case number (if
1.	Do you h ✓ No ☐ Yes	ave any codebtors	? (If you are filing a joir	nt case, do not list either spo	ouse as a codebtor.)	
2.	California No. G Yes. D	, Idaho, Louisiana, N o to line 3. Did your spouse, forr	levada, New Mexico, F	nunity property state or ter Puerto Rico, Texas, Washing nuivalent live with you at the	ton, and Wisconsin.)	erty states and territories include Arizona,
	☐ Ye		ity state or territory did	you live?	Fill in the	name and current address of that person.
	N	ame of your spouse	, former spouse, or leg	al equivalent		
	N	umber	Street			
	c	ity	State	ZIP Code		
3.	2 again a	s a codebtor only i	f that person is a gua	rantor or cosigner. Make	sure you have listed the	filing with you. List the person shown in line creditor on <i>Schedule D</i> (Official Form 106D), le E/F, or <i>Schedule G</i> to fill out Column 2.
	Column 1	: Your codebtor			Column 2: T	he creditor to whom you owe the debt
					Check all sc	hedules that apply:
3.1						
	Name					e D, line
	Number		Street			e E/F, line
					Schedule	e G, line
	City		State	<u>z</u>	IP Code	
3.2	Name				Schedule	e D, line
	Name					e E/F, line
	Number		Street		☐ Schedule	

State

ZIP Code

City

ill in this inform	ation to identify yo	ur case:			
Debtor 1	Aliya	Ishan	Mitchell		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		Check if this is:
United States E	Bankruptcy Court fo	or the: Eastern	District of Pe	ennsylvania_	An amended filingA supplement showing postpetition
Case number					13 income as of the following date:
(if known)					MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	Fart 1: Describe Employn		d case numi	oer (if kn	own). A	Answer every q	uestion.	•	
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-filing sp	ouse
	If you have more than one job, attach a separate page with information about additional	Employment status	☑ Employ ☐ Not employ				☐ Emplo	•	
	employers. Include part-time, seasonal, or self-employed work.	Occupation	Property	Manage	er				
	Occupation may include student or homemaker, if it applies.	Employer's name	THG Owr	ner LP					
		Employer's address	300 Blv o	of the Ar Street		s Ste 104	Number	Street	
			Lakewoo	d, NJ 08	3701				
			City	Sta	ate	ZIP Code	City	State	ZIP Code
		How long employed there?			_				
	Part 2: Give Details Abou	t Monthly Income							
	Estimate monthly income as of unless you are separated.	the date you file this form. If y	you have noth	ning to re	port for	any line, write \$	0 in the spac	e. Include your no	on-filing spouse
	If you or your non-filing spouse habelow. If you need more space, at			ormation	for all e	employers for tha	at person on	the lines	
					Fo	r Debtor 1	For Debt	or 2 or g spouse	
2.	List monthly gross wages, salad deductions). If not paid monthly, c			2.		\$6,041.66			
3.	Estimate and list monthly overt	ime pay.		3. +	÷	\$0.00	+		
4.	Calculate gross income. Add lin	e 2 + line 3.		4.		\$6,041.66			

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Debtor 1

Aliya Ishan Mitchell Case number (if known)

First Name Middle Name Last Name

For Debtor 1 For Debtor 2 or

				For Debtor 1	For Debtor 2 or non-filing spouse			
	Cop	y line 4 here→	4.	\$6,041.66				
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$1,499.85				
	5b.	Mandatory contributions for retirement plans	5b.	\$0.00				
	5c.	Voluntary contributions for retirement plans	5c.	\$60.41				
	5d.	Required repayments of retirement fund loans	5d.	\$0.00				
	5e.	Insurance	5e.	\$0.00				
	5f.	Domestic support obligations	5f.	\$0.00				
	5g.	Union dues	5g.	\$0.00				
	5h.	Other deductions. Specify:	5h. +	\$0.00	+			
6.	Add	I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$1,560.26				
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,481.40				
8.	List	all other income regularly received:						
	8a.	Net income from rental property and from operating a business, profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00				
	8b.	Interest and dividends	8b.	\$0.00				
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00				
	8d.	Unemployment compensation	8d.	\$0.00				
	8e.	Social Security	8e.	\$0.00				
	8f.	Other government assistance that you regularly receive						
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		\$0.00				
		Specify:	8f.	\$0.00				
	8g.	Pension or retirement income	8g.	\$0.00				
	8h.	Other monthly income. Specify: 2024 Tax Refund	8h. +	. \$84.66	+			
9.	Add	l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$84.66				
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,566.06		=[\$4,56	6.06
11.	Stat	e all other regular contributions to the expenses that you list in Schedu	ıle J.					
		ude contributions from an unmarried partner, members of your household, you'ds or relatives.	ur depe	endents, your roommate	es, and other			
	Do r	not include any amounts already included in lines 2-10 or amounts that are no	ot avail	able to pay expenses lis	sted in Schedule J.			
	Spe	cify:			11.	+ _	\$(0.00

Entered 06/12/25 09:49:00 Desc Main Case 25-12355 Filed 06/12/25 Doc 1 Page 39 of 54 Document Debtor 1 Mitchell Aliya Ishan Case number (if known) _ First Name Middle Name Last Name 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$4,566.06 12. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ✓ No. Yes. Explain:

Official Form 106l Schedule I: Your Income page 3

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Fill in this information	n to identify your case			
Debtor 1	Aliya First Name	Ishan Middle Name	Mitchell Last Name	Check if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing A supplement showing postpetition chapter 13 expenses as of the following date:
United States Bankruptcy Court for the:		Easte	rn District of Penn	1
Case number (if known)				, 227,

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Househol	d				
1. Is this a joint case?					
No. Go to line 2. Yes. Does Debtor 2 live in a sep No	parate household? • Official Form 106J-2, Expenses for	r Sanarata Household of Debtor 2			
2. Do you have dependents?	✓ No	Coparate Floadericia of Desier 2.			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?	
Do not state the dependents' names.				No. Yes.	
				No. Yes.	
				No. Yes.	
				No. Yes.	
				No. Yes.	
Do your expenses include expenses of people other than yourself and your dependents?	⊻ No □ _{Yes}				
Part 2: Estimate Your Ongoing	Monthly Expenses				
Estimate your expenses as of your ba date after the bankruptcy is filed. If thi					
Include expenses paid for with non-ca such assistance and have included it			You	ır expenses	
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$895.00					
If not included in line 4:					
4a. Real estate taxes 4a. \$0.00					
4b. Property, homeowner's, or renter's insurance 4b. \$50.00					
4c. Home maintenance, repair, an	d upkeep expenses		4c	\$50.00	
4d. Homeowner's association or condominium dues 4d. \$0.00					

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Debtor 1

Aliya Ishan Mitchell Case number (if known) _______

First Name Middle Name Last Name

	Yo	our expenses
Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
Utilities:		
6a. Electricity, heat, natural gas	6a	\$200.00
6b. Water, sewer, garbage collection	6b	\$75.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$200.00
6d. Other. Specify:	6d.	\$0.00
Food and housekeeping supplies	7.	\$332.00
Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$75.00
). Personal care products and services	10.	\$100.00
. Medical and dental expenses	11	\$150.00
2. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$355.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
Charitable contributions and religious donations	14.	\$0.00
5. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$250.00
15d. Other insurance. Specify:	15d	\$0.00
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
. Installment or lease payments:		
17a. Car payments for Vehicle 1 2024 Volkswagen Atlas	17a	\$959.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
3. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. <u> </u>	\$0.00
Other payments you make to support others who do not live with you.		
Specify:	19	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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eptor	1 Aliya	ısnan	Mitchell	Case number (if known)	
	First Name	Middle Name	Last Name		
1. O t	ther. Specify:		_	21. +	\$0.00
2. C a	alculate your monthly e	xpenses.			
22	2a. Add lines 4 through 2	21.		22a	\$3,691.00
22	2b. Copy line 22 (monthly	y expenses for Debtor 2),	22b.	\$0.00	
22	2c. Add line 22a and 22b	o. The result is your month	y expenses.	22c.	\$3,691.00
. Ca	alculate your monthly n	et income.			
23a. Copy line 12 (your combined monthly income) from Schedule I.				23a. <u> </u>	\$4,566.06
23b. Copy your monthly expenses from line 22c above.				23b. _	\$3,691.00
23	3c. Subtract your monthly	y expenses from your mor	thly income.		
	The result is your mo	onthly net income.		23c	\$875.06
l. Do	o you expect an increas	e or decrease in your exp	enses within the year after you file	e this form?	
			car loan within the year or do you of a modification to the terms of you		
V	1 No.				
	Yes.				

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Fill in this information	n to identify your case:		
Debtor 1	Aliya	Ishan	Mitchell
	First Name	Middle Name	Last Name
ebtor 2			
spouse, if filing)	First Name	Middle Name	Last Name
ited States Bank	ruptcy Court for the:	Easte	ern District of Pennsylvania
ase number known)			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

lacksquare Check if this is an amended filing

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	,
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$167,920.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$29,895.00
1c. Copy line 63, Total of all property on Schedule A/B	\$197,815.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	•
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	<u>\$141,266.53</u>
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$104,993.0
Your total liabilities	\$246,259.5
art 3: Summarize Your Income and Expenses	
I. Schedule I: Your Income (Official Form 1061)	\$4,566.00
. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	

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			Doddinon rago	110101
Debtor 1	Aliya	Ishan	Mitchell	Case number (if known) —
	First Name	Middle Name	Last Name	

Answer These Questions for Administrative and Statistical Records Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **✓** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$5,111.96 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e.Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$0.00 9g. Total. Add lines 9a through 9f. \$0.00

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Fill in this information	to identify your case	:		
Debtor 1	Aliya	Ishan	Mitchell	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Easte	rn District of Pennsylvar	nia
Case number (if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorn	ney to help you fill out bankruptcy forms?
☑ No ☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the sum	mary and schedules filed with this declaration and that they are true and correct.
Y // / / / / / / / / / / / / / / / / /	
/s/ Aliya Ishan Mitchell Aliya Ishan Mitchell, Debtor 1	
Date 06/12/2025 MM/ DD/ YYYY	

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Fill in this information	Fill in this information to identify your case:							
Debtor 1	_Aliya	Ishan	Mitchell					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bank	ruptcy Court for the:	Easte	rn District of Pennsylvania					
Case number								
(if known)								

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current marital status?				
☑ Married				
☐ Not married				
2. During the last 3 years, have you lived ar	nywhere other than where y	ou live now?		
☑ No				
Yes. List all of the places you lived in the	ne last 3 years. Do not includ	le where you live now.		
3. Within the last 8 years, did you ever live verritories include Arizona, California, Idaho,				
√ No				
☐ Yes. Make sure you fill out <i>Schedule H</i>	: Your Codebtors (Official Fo	orm 106H).		
Part 2: Explain the Sources of Your I	Income			
4. Did you have any income from employmer. Fill in the total amount of income you receive if you are filing a joint case and you have incential. No	ent or from operating a bused from all jobs and all busing	esses, including part-time a	ctivities.	rears?
4. Did you have any income from employmer. Fill in the total amount of income you receive if you are filing a joint case and you have income.	ent or from operating a bused from all jobs and all busing	esses, including part-time a	ctivities.	rears?
4. Did you have any income from employmerill in the total amount of income you receive if you are filing a joint case and you have inc	ent or from operating a bused from all jobs and all busing	esses, including part-time a	ctivities.	vears?
4. Did you have any income from employmerill in the total amount of income you receive if you are filing a joint case and you have inc	ent or from operating a bus ed from all jobs and all busin ome that you receive togeth	esses, including part-time a	ctivities. ebtor 1.	rears? Gross Income
4. Did you have any income from employmer. Fill in the total amount of income you receive if you are filing a joint case and you have incomer. No	ent or from operating a bused from all jobs and all busing ome that you receive togeth	esses, including part-time a er, list it only once under De	ctivities. ebtor 1. Debtor 2	
4. Did you have any income from employmer Fill in the total amount of income you receive If you are filing a joint case and you have income No	ent or from operating a bused from all jobs and all busingome that you receive togeth Debtor 1 Sources of income	esses, including part-time a er, list it only once under De Gross Income (before deductions and	Debtor 2 Sources of income	Gross Income (before deductions and

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ebtor 1	Aliya	Ishan Mitc	hell	Case number	(if known)
	First Name	Middle Name Last N	lame		
	alendar year: 1 to December 31, 202	Wages, commi bonuses, tips	ssions, \$155,2 3	Wages, commission bonuses, tips	sions,
(January		YY Operating a bus	siness	Operating a busing	ness
	alendar year before than 1 to December 31, 202	honuses tine	ssions, \$139,6 6	Wages, commiss bonuses, tips	sions,
	YY	YY	siness	Operating a busin	ness
Include inco public bene filing a joint No	ome regardless of wheth fit payments; pensions;		amples of <i>other income</i> ands; money collected fro	re alimony; child support; Socia m lawsuits; royalties; and gamb	I Security, unemployment, and other ling and lottery winnings. If you are
VI Tes. I	iii iii tile details.	Debtor 1		Debtor 2	
		Sources of incom	ne Gross income		e Gross Income from
		Describe below.	each source	Describe below.	each source
			(before deducti exclusions)		(before deductions and exclusions)
date you	nuary 1 of current year u				
	alendar year:	Social Security	\$15,2	261.00	<u> </u>
(January	1 to December 31, 202 YY	4) YY			
For the c	alendar year before tha	t: Social Security	\$15.2	261.00	
	1 to December 31, <u>202</u>	<u>3</u>)			
Part 3: Lis	st Certain Payments	s You Made Before You	-iled for Bankruptcy		
6. Are eithe	r Debtor 1's or Debtor 2	's debts primarily consumer	debts?		
☐ No.		ebtor 2 has primarily consulor a personal, family, or hous		bts are defined in 11 U.S.C. § 10	01(8) as "incurred by
	During the 90 days before	ore you filed for bankruptcy, c	id you pay any creditor a	total of \$8,575* or more?	
	☐ No. Go to line 7.				
	paid that cred		s for domestic support ob	re in one or more payments and oligations, such as child support	
				d on or after the date of adjustme	ent.

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Debtor 1	Aliya	Ishan	Mitchell		Case number (if	known)			
	First Name	Middle Name	Last Name						
√ Yes.	Debtor 1 or Debtor 2 or both have primarily consumer debts.								
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?							
	✓ No. Go to line								
	include		support obligations, suc	00 or more and the total a h as child support and alir					
<i>Insiders</i> ind you are an	clude your relatives officer, director, pe	; any general partners; erson in control, or own	relatives of any general per of 20% or more of their	n a debt you owed anyone partners; partnerships of v r voting securities; and any support obligations, such	which you are a gene y managing agent, in	eral partner; corporations of which ncluding one for a business you			
√ No									
Yes. L	ist all payments to	an insider.							
Include pay		led for bankruptcy, did aranteed or cosigned b		s or transfer any property	y on account of a de	ebt that benefited an insider?			
√ No									
☐ Yes. L	ist all payments th	at benefited an insider.							
Part 4: Id	lentify Legal Ac	tions, Repossessic	ons, and Foreclosure	S					
	n matters, including			suit, court action, or admorces, collection suits, par		ing? ort or custody modifications, and			
√ No									
☐ Yes. F	Fill in the details.								
Check all the	hat apply and fill in		as any of your property	repossessed, foreclosed,	, garnished, attache	d, seized, or levied?			
✓ No. G	io to line 11.								
☐ Yes. F	Fill in the informatio	n below.							
		u filed for bankruptcy, cause you owed a deb		ng a bank or financial inst	titution, set off any	amounts from your accounts or			
√ No									
☐ Yes. F	Fill in the details.								
		filed for bankruptcy, w an, or another official		in the possession of an a	ssignee for the ben	efit of creditors, a court-			
√ No									
Yes									

Page 49 of 54 Document Debtor 1 Aliya Ishan Mitchell Case number (if known) _ First Name Last Name Middle Name List Certain Gifts and Contributions Part 5: 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **✓** No Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **✓** No Yes. Fill in the details for each gift or contribution. List Certain Losses Part 6: 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **✓** No ☐ Yes. Fill in the details. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ■No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Cibik Law, P.C. Person Who Was Paid Attorney's Fee; Attorney's Costs 05/08/2025 \$2,000.00 1500 Walnut Street Suite 900 Number Street 05/08/2025 \$575.00 Philadelphia, PA 19102 State ZIP Code mail@cibiklaw.com Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **√** No Yes. Fill in the details.

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Doc 1 Filed 06/12/25 Case 25-12355 Entered 06/12/25 09:49:00 Desc Main Document Page 51 of 54 Debtor 1 Aliya Ishan Mitchell Case number (if known) _ First Name Last Name Middle Name Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **√**No Yes. Fill in the details. 25. Have you notified any governmental unit of any release of hazardous material? **√**No Yes. Fill in the details. 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **✓** No Yes. Fill in the details. Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☑ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number All Around Bizness** Do not include Social Security number or ITIN. Management, LLC **Property Management** Name EIN: 8 7 - 3 1 8 7 2 0 8 Dates business existed Name of accountant or bookkeeper 2800 Cecil B Moore Ave Aliva Mitchell From 10/13/2021 To 2024 Number Street

Philadelphia, PA 19121-2706

State ZIP Code

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ebtor 1	Aliya	Ishan	Mitchell	Case number (if known)
	First Name	Middle Name	Last Name	
	years before you rother parties.	filed for bankruptcy, d	lid you give a financial s	statement to anyone about your business? Include all financial institutions,
√ No				
☐ Yes. Fi	II in the details belo	ow.		
Part 12: S	ign Below			
X <u>/s/ /</u>		fines up to \$250,000,		ty, or obtaining money or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
Sigila	iture of Aliya Isriair	Mitchell, Debtor 1		
Date	06/12/2025	<u></u>		
D	and a different constant	0.00	of Figure 1 of Affective fourth	with the left of the Boulean to (Official Form 407)
✓ No	ich additional pag	es to your <i>Statement d</i>	ot Financiai Aπairs for i	ndividuals Filing for Bankruptcy (Official Form 107)?
Yes				
Did you pay	or agree to pay s	omeone who is not an	attorney to help you fil	l out bankruptcy forms?
√ No				
□Ves N	ame of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Pennsylvania

In re	ľ	Mitchell, Aliya Isha	n					
					Case No.		-	
Debte	or				Chapter	13		
			DISCLOSURE OF COM	MPENSATION OF A	TTORNEY F	OR DEBTOR		
1.	con	mpensation paid to	c. § 329(a) and Fed. Bankr. P. 2 me within one year before the behalf of the debtor(s) in conte	e filing of the petition in b	ankruptcy, or a	greed to be paid to	me, for services rendered	
	For	legal services, I h	ave agreed to accept			<u> </u>	\$5,335.00	
	Pric	or to the filing of th	is statement I have received			<u> </u>	\$2,000.00	
	Bal	ance Due					\$3,335.00	
2.	The	e source of the cor	npensation paid to me was:					
	√	Debtor	Other (specify)					
3.	The	e source of compe	nsation to be paid to me is:					
	√	Debtor	Other (specify)					
4.		I have not agreed firm.	d to share the above-disclosed	compensation with any	other person ui	nless they are mem	bers and associates of my	
	law	=	share the above-disclosed core agreement, together with a li		•			
5.	In r	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	a.	 Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; 						
	b.	Preparation and	filing of any petition, schedule	es, statements of affairs a	and plan which	may be required;		
	C.	Representation	of the debtor at the meeting of	creditors and confirmati	on hearing, and	d any adjourned hea	arings thereof;	
6.	Ву	agreement with the	e debtor(s), the above-disclose	ed fee does not include t	he following se	rvices:		

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B2030 (Form 2030) (12/15)

Filing fee plus Costs & Expenses. Motion to Extend the Stay. Continued Meeting of Creditor Hearings, Addition of Creditor after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$375 per hour per attorney

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/12/2025 /s/ Michael A. Cibik

Date Michael A. Cibik
Signature of Attorney

Bar Number: 23110 Cibik Law, P.C. 1500 Walnut Street Suite 900 Philadelphia, PA 19102 Phone: (215) 735-1060

Cibik Law, P.C.

Name of law firm